



# FUNDS TRANSFER REQUEST (OVER-THE-COUNTER)

Wire No. \_\_\_\_\_  
 Repetitive No. \_\_\_\_\_  
 Date 7/22/11

Value Date <u>7/22/11</u>
Originator (Debit Party) - All Fields Required DDA, SAV, GL <u>DDA</u> Account Number <u>48086659</u> Customer Name <u>OCEANVIEW DEVELOPMENT LLC</u> Street Address <u>986 MCGREAGOR LANE</u> City & State <u>HONOLULU HI 96817</u>
Ordering Party (Complete when using GL debit; All Fields Req'd) Account Number _____ Customer Name _____ Street Address _____ City & State _____
Beneficiary - Name or Account Number Required Account Number/IBAN <u>766820831</u> Name <u>R. Robertson &amp; Asso. PLLC, IOLTA Trust Account</u> Address _____
Pay Through Bank ABA or SWIFT _____ Bank Name _____
Beneficiary's Bank ABA or SWIFT BIC <u>111000614</u> Bank Name <u>CHASE</u> City, State, or Country <u>Brownsville, TX.</u>
Bank to Bank Information:
Originator to Beneficiary Information:

Domestic <input checked="" type="checkbox"/> Foreign <input type="checkbox"/>	U.S. Dollars <input checked="" type="checkbox"/> Foreign <input type="checkbox"/>	Foreign Rate _____
<input checked="" type="checkbox"/> Debit My Account <input type="checkbox"/> FHB Check Auth. Code _____ <input type="checkbox"/> Cash <input type="checkbox"/> Other _____ Describe _____		U.S. Amt. \$ <u>1,000,000.00</u>
Prepared By <u>Mau</u>	Emp. No. <u>15249</u>	Foreign Amt. _____
Authorized By <u>[Signature]</u>	Emp. No. <u>015082</u>	Wire Chg. \$ <u>70.00</u>
Authorized By (Req. If Over \$100,000) <u>[Signature]</u>	Emp. No. <u>15548</u>	Total \$ <u>1,000,070.00</u>
The person signing below certifies that s/he is authorized to execute this Funds Transfer Request ("Request") on behalf of the Customer/Originator named above (and referred to in this Request as "Customer") and that all information is true, correct, and complete. Customer understands that (i) each funds transfer is subject to First Hawaiian Bank ("FHB") Funds Transfer Agreement, a copy of which Customer acknowledges receipt and review; and (ii) FHB and its correspondents take all funds transfer requests for transmission without liability for transmission delays, any bank handling fees, or any misinterpretation of the message, or otherwise, except to the extent provided in the Funds Transfer Agreement.		
Customer Signature <u>[Signature]</u>		Title <u>Member</u>
Print Name <u>REUBEN FUNG</u>		
Phone Number <u>808-864-7556</u>		
Entered On-Line By _____	Auth. On-Line By _____	
Employee No. _____	Employee No. _____	

## Bank Use Only - For Transfers of \$3,000 or More

Originator is: ☒ Established Customer, Account Type and Number DDA 48-086659  
☐ Non-Customer. (Complete section below and send copy of this form to Corporate Compliance Division.)

<b>Non-Customer Information</b> The following information is <b>required</b> for non-customer originators: <ul style="list-style-type: none"> <li>Originator's ID Type _____</li> <li>Complete <b>one</b> of the following items:                         <ul style="list-style-type: none"> <li><input type="checkbox"/> Taxpayer ID No. _____</li> <li><input type="checkbox"/> Alien ID No. _____</li> <li><input type="checkbox"/> Passport No. _____</li> </ul> </li> </ul>		ID No. <u>66777</u>  Country <u>24</u>
If the person completing the transfer is not the originator, provide the following information about the person completing the transfer: Name (print) _____ Type of Identification _____ Complete <b>one</b> of the following items: <ul style="list-style-type: none"> <li><input type="checkbox"/> Taxpayer ID No. _____</li> <li><input type="checkbox"/> Alien ID No. _____</li> <li><input type="checkbox"/> Passport No. _____</li> </ul>		ID No. _____ Country _____

## Wire Transfer Checklist

- ☐ Provide all customers/originators with a copy of the Funds Transfer Agreement, EX-877.
- ☐ Business entities must complete the Certification of Resolutions for Funds Transfers, EX-874.
- ☐ For transfers \$3000 or more, if the wire was not funded from the Customer/Originator's FHB account, send a copy of the Request for One-Time Funds Transfer to Corporate Compliance Division.
- ☐ If the customer/originator is requesting on-going transfers, complete the Funds Transfer Application, EX-861.

Be sure all forms are completely filled out and signed by authorized signers.